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Amendment
Attorney Docket No. S63.2Q-7132-US02

Remarks

This Amendment is in response to the Office Action dated **January 12, 2004**. Claims 27-30, 33-39, 41-43, 45, and 46 are pending in the instant application. The Office Action rejected claims 27-30 under 35 U.S.C. 102 as anticipated by U.S. Patent No. 5,525,388 ("Wand"). Claims 33-39, 42-43, and 46 were rejected in the Office Action under 35 U.S.C. 103 as being unpatentable over Wand in view of U.S. Patent No. 4,906,241 ("Noddin"). The Office Action rejected claims 41 and 45 under 35 U.S.C. 103 as being unpatentable over Noddin in view of U.S. Patent No. 6,024,722 ("Rau").

Claim Rejections—35 USC § 102

In the Office Action, claims 27-29 were rejected under 35 USC § 102(b) as being anticipated by Wand. Instant claim 27 is directed toward a medical balloon wherein the wall thickness of at least one segment of the balloon selected from the group consisting of the proximal waist, the proximal cone, the distal waist, and the distal cone is *less* than the body wall thickness. This is in contrast with the Wand reference which states that "[t]he wall thickness of the waist portions of the balloon which extend proximally and distal to the tapered sections generally will be larger than the wall thickness of the working and tapered sections." (Wand, column 2, lines 22-25). In other words, the wall thickness of the proximal and distal waist sections in Wand will be larger than the body wall thickness. (Id.) Because Wand does not teach or suggest all of the elements of the instant claim 27 the rejection is respectfully overcome.

Claims 28-29 depend from independent claim 27. Claims 28-29 are not anticipated by Wand for at least the reasons identified above.

Claim Rejections—35 USC § 103

In the Office Action, claims 33-39, 42-43, and 46 were rejected under 35 USC § 103(a) as being unpatentable over Wand in view of Noddin. Applicant has cancelled claims 33-41. Also, Applicant has amended claim 42 such that the medical balloon includes the limitation that both the proximal and distal cone portions have wall thicknesses less than the body wall thickness. As indicated above Wand describes a balloon with proximal and distal cone portion sections that have "essentially the same wall thicknesses," (Wand, column 2, line 18). Noddin,

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describes providing a balloon with proximal and distal cone portion sections that are of "substantially...the same value" (Noddin, column 8, line 46) as the body wall thickness. Neither Wand nor Noddin, separately or as a whole, provide any suggestion or motivation to produce a medical balloon with the limitations of instant claims 42, 43 and 45-46.

Conclusion

In view of the foregoing it is believed that the present application is in condition for allowance. Early action to that effect is earnestly solicited.

Respectfully submitted,

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